

01/28/02



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PTO/SB/05 (11-00)

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Approved for use through 10/31/2002. OMB 0651-0032

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JCE68 U.S. PTO
10/058723

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.:	1924
	First Inventor:	Shore, et. al.
	Title:	PREPARATION OF MODIFIED FLUFF PULP, FLUFF PULP PRODUCTS AND USE THEREOF
	Express Mail Label No.:	EL569397262US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF)
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>24</u>] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets _____]	ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other _____
5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>1</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. Application Data Sheet. See 37 CFR 1.76	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a Preliminary Amendment, or in an Application Data Sheet 37 CFR 1.76:
☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No. _____ / _____
Prior application information: Examiner _____ Group/Art Unit: _____
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or Declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying Continuation or Divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
Name	Laurelee A. Duncan				
Address	NATIONAL STARCH AND CHEMICAL COMPANY				
	P.O. Box 6500				
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Name (Print/Type)	Laurelee A. Duncan		Registration No. (Attorney/Agent)	44,096	
Signature	<i>Laurelee A. Duncan</i>		Date	01/28/02	

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 816.00

Complete if Known

Application Number	To Be Assigned
Filing Date	January 18, 2002
First Named Inventor	Shore, et. al.
Examiner Name	To Be Assigned
Group Art Unit	To Be Assigned
Attorney Docket No.	1924

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account:Deposit Account Number
Deposit Account Name

14-0455

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	740
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	

SUBTOTAL (1) (\$ 740

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
22	-20** = 2	36	36
3	-3** = 0	0	0
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 36

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105 130	205 65			Surcharge - late filing fee or oath	
127 50	227 25			Surcharge - late provisional filing fee or cover sheet	
139 130	139 130			Non-English specification	
147 2,520	147 2,520			For filing a request for <i>ex parte</i> reexamination	
112 920*	112 920*			Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*			Requesting publication of SIR after Examiner action	
115 110	215 55			Extension for reply within first month	
116 400	216 200			Extension for reply within second month	
117 920	217 460			Extension for reply within third month	
118 1,440	218 720			Extension for reply within fourth month	
128 1,960	228 980			Extension for reply within fifth month	
119 320	219 160			Notice of Appeal	
120 320	220 160			Filing a brief in support of an appeal	
121 280	221 140			Request for oral hearing	
138 1,510	138 1,510			Petition to institute a public use proceeding	
140 110	240 55			Petition to revive - unavoidable	
141 1,280	241 640			Petition to revive - unintentional	
142 1,280	242 640			Utility issue fee (or reissue)	
143 460	243 230			Design issue fee	
144 620	244 310			Plant issue fee	
122 130	122 130			Petitions to the Commissioner	
123 50	123 50			Processing fee under 37 CFR 1 17(q)	
126 180	126 180			Submission of Information Disclosure Stmt	
581 40	581 40			Recording each patent assignment per property (times number of properties)	40
146 740	246 370			Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370			For each additional invention to be examined (37 CFR § 1 129(b))	
179 740	279 370			Request for Continued Examination (RCE)	
169 900	169 900			Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40

SUBMITTED BY

Name (Print/Type)	Laurelee A. Duncan	Registration No. (Attorney/Agent)	40,096	Telephone	908-685-5433
Signature	<i>Laurelee A. Duncan</i>	Date	01/28 /02		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231